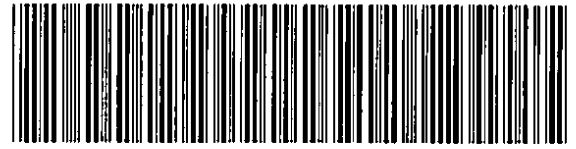


L23000264265



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07/20/23--01015--008 \*\*150.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies  Certificates of Status

Special Instructions to Filing Officer:  
  
J. HORNE  
JUL 20 2023

Office Use Only

2023 JUL 20 PM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
D RECEIVED  
2023 JUL 20 PM 12:22  
TALLAHASSEE, FLORIDA

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** VILLA LAND LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NAHED EBOTAHA

Name of Person

VILLA LAND LLC

Firm/Company

511 SKYVIEW AVENUE

Address

CLEARWATER FLORIDA 33756

City/State and Zip Code

NICKSBUSINESS2008@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NAHED EBOTAHA

Name of Person

813

at ( )

Area Code

5414104

Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee       \$30.00 Filing Fee & Certificate of Status       \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)       \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2023 JUL 20 PM  
SECRETARY  
TALLAHASSEE

VILLA LAND LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/31/2023 and assigned Florida document number L23000264265.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

511 SKYVIEW AVENUE

**(Principal office address MUST BE A STREET ADDRESS)**

CLEARWATER FLORIDA 33756

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

NAHED EBOTAHA

New Registered Office Address:

511 SKYVIEW AVENUE

*Enter Florida street address*

CLEARWATER

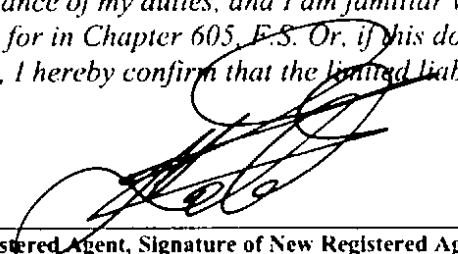
Florida 33756

*City*

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*



**If Changing Registered Agent, Signature of New Registered Agent**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PRESIDE	NAHED EBOTAHA	511 SKYVIEW AVE CLEARWATER FLORIDA	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LEBRON, JENNIFER		<input type="checkbox"/> Add
		511 SKYVIEW AVECLEARWATER, FL 33756	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

REMOVING

LEBRON, JENNIFER

ADDING

NAHED EBOTAHA

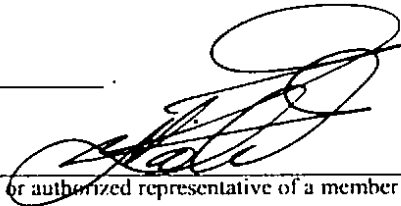
**E. Effective date, if other than the date of filing:** 5/31/2023 **(optional)**

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 5/31/2023



Signature of a member or authorized representative of a member

NAHED EBOTAHA

Typed or printed name of signee